FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines STRAIGHT TALK AMERICA PO Box 9785 ADDRESS (number and street) Check if different than previously **ALEXANDRIA** ۷A 22304 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00413245 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 08 0 1 2007 8 0 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Keith Davis Type or Print Name of Treasurer Electronically Filed by Keith Davis 09 20 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

Image# 27931219073

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

F	eport Covering the Period: From:	0 1 Y Y W Y Y Z 0 0 7	D: 08 31 2007
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Y2007 Y		33386.58
	(b) Cash on Hand at Begining of Reporting Period	1707.68	
	(c) Total Receipts (from Line 19)	40033.00	149288.39
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	41740.68	182674.97
7.	Total Disbursements (from Line 31)	20425.44	161359.73
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	21315.24	21315.24
9.	Debts and Obligations owed TO the committee (Itemize all on		
	Schedule C and/or Schedule D)	10525.86	
10.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	178828.72	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

STRAIGHT TALK AMERICA

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	40000.00	104000.00
(ii) Unitemized	33.00	2720.38
(iii) TOTAL (add Lines 11(a)(i) and (ii)	40033.00	106720.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	25000.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	40033.00	131720.38
Transfers From Affiliated/Other Party Committees	0.00	0.00
All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	376.60
to Federal candidates and Other Political Committees	0.00	0.00
Other Federal Receipts (Dividends, Interest, etc.)	0.00	17191.41
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	40033.00	149288.39
Total Federal Receipts	40033.00	149288.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

Individuals/Persons Other

(b) Political Party Committees (c) Other Political Committees

(d) Total Contribution Refunds

(a) Shared Federal Election Activity

(i) Federal Share

(ii) "Levin" Share

With Federal Funds

(from Schedule H6)

32. Total Federal Disbursements

from Line 31).....

23.

(c) Total Operating Expenditures

21. Operating Expenditures:

Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 20425.44 191009.73 Expenditures..... 20425.44 191009.73 (add 21(a)(i), (a)(ii) and (b))............ 0.00 0.00 Committees..... Federal Candidates/Committees.....and Other Political Committees..... -12500.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 0.00 100.00 Than Political Committees 0.00 0.00 0.00 0.00 (such as PACs) 0.00 100.00 (add Lines 28(a), (b), and (c)) 0.00 -17250.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) 0.00 0.00 0.00 0.00 (b) Federal Election Activity Paid Entirely 0.00 0.00 (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 20425.44 161359.73 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. (subtract Line 21(a)(ii) from Line 30(a)(ii) 20425.44 161359.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	40033.00	131720.38
34.	Total Contribution Refunds (from Line 28(d))	0.00	100.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	40033.00	131620.38
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20425.44	191009.73
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	376.60
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	20425.44	190633.13

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 24
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	STRAIGHT TALK AMERICA			_
Α.	Full Name (Last, First, Middle Initial) Mrs. Patricia J. Bloomfield			Date of Receipt
~.	Mailing Address 940 1st St			M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
	City	State	Zip Code	Transaction ID: SA11A1.97593
	Manhattan Beach	CA	90266	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer Self	Occupation Civic Vol		Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00]
В.	Full Name (Last, First, Middle Initial) Mr. William E. Bloomfield, Jr.			Date of Receipt
	Mailing Address 940 1st Street			08 20 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.97594
	Manhattan Beach	CA	90266-6604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer Web Service Company	Occupation Executive		Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00]
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Dan Crippen			Date of Receipt
	Mailing Address 5137 Massachusetts Av	e.		08 31 2007
	City	State	Zip Code	Transaction ID: SA11A1.97596
	Bethesda	MD	20816	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer Self Employed	Occupation Consulta	nt	Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		5000.00	
s	UBTOTAL of Receipts This Page (optional)			15000.00
Т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/24
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED RECEIL 13		Detailed Summary Page	X 11a 11b 11c 12
Δ.				13 14 15 16 17
or	ny information copied from such Reports and Si for commercial purposes, other than using the	name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	STRAIGHT TALK AMERICA			
Α.	Full Name (Last, First, Middle Initial) Mr. Richard H. Davis			Date of Receipt
	Mailing Address 1905 Mallinson Way			0 8 2 0 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.97598
	Alexandria	VA	22308-2760	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		5000.00
	Name of Employer Davis Manafort	Occupation President		Contribution
	Receipt For:		Year-to-Date ▼	
	Primary General	00 0		7
	Other (specify) ▼		5000.00	
В.	Full Name (Last, First, Middle Initial) Mr. John F. Lehman, Jr.			Date of Receipt
	Mailing Address 450 Park Ave			M M / D D / Y Y Y
	FI 6		7' 0 1	08 31 2007
	City	State	Zip Code	Transaction ID: SA11A1.97599
	New York	NY	10022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer	Occupation	า	Contribution
	JF Lehman and Co.	Chairmar		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		5000.00	7
	Other (specify) ▼		3000.00	_
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Peter Malone			Date of Receipt
	Mailing Address 149 Randolph Avenue			M M / D D / Y Y Y Y
				08 31 2007
	City	State	Zip Code	Transaction ID: SA11A1.97601
	Milton	MA	02186-3524	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	recerai poinicai committee.			Contribution
	Name of Employer CSP Associates, Inc.	Occupation		Contribution
		Managing		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		5000.00	
_				
				15000.00
S	UBTOTAL of Receipts This Page (optional)			13000.00
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1 '	VIAL THIS I CHOU (IAST PAYE THIS HITE HUTTIDE!	O: 11 y /		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Other (specify)

Full Name (Last, First, Middle Initial)

Ste 600

Name of Employer Davis Manafort

Primary

B. Mr. Solomon D. Trujillo

Mailing Address

Greenwood Village

Name of Employer Telstra Corp. Ltd.

Primary

Receipt For:

FEC ID number of contributing

federal political committee.

Other (specify)

City

Mailing Address 9357 Mount Vernon Circle

General

General

8400 E. Crescent Pkwy

State

State

Occupation

Chief Executive Officer

Aggregate Year-to-Date ▼

5000.00

CO

C

VA

C

Mr. Paul J. Manafort, Jr.

City

Alexandria

Receipt For:

PAGE 8/24 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Receipt 08 3 1 2007 Zip Code Transaction ID: SA11A1.97602 22309 Amount of Each Receipt this Period 5000.00 Contribution Occupation Attorney Aggregate Year-to-Date ▼ 5000.00 Date of Receipt 8 0 20 2007 Transaction ID: SA11A1.97603 Zip Code 80111-2842 Amount of Each Receipt this Period 5000.00 Contribution

SUBTOTAL of Receipts This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	→	40000.00

	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s	s)	FOR LINE (check on	E NUMBER: PAGE 9/24
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22 23 24 25 2 28a 28b 28c 29 3
	y Information copied from such Reports and State for commercial purposes, other than using the nar				
\rangle	NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA	To and data oct of any pointed			<u></u>
Α.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270				Transaction ID: SB21B.97581 Date of Disbursement O 8 D 2 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Newark	State Zip Code NJ 07101-1270)		Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment (See Attached Memos) Candidate Name		Са	001 tegory/ Type	86.55
	Office Sought: House Disburs	sement For: Primary General Other (specify) ▼) ho	
В.	Full Name (Last, First, Middle Initial) US Postal Service				Transaction ID: SB21B.97581.1 Date of Disbursement
	Mailing Address 1100 Wythe Street				$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} D & 2 & 4 \\ 2 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City Alexandria	State Zip Code VA 22314			Amount of Each Disbursement this Period 69.60
	Purpose of Disbursement Postage Candidate Name		Са	001 tegory/ Type	
	Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼	•		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Care First Blue Cross Blue Shield				Transaction ID: SB21B.97578 Date of Disbursement
	Mailing Address PO Box 79749				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & D & D & Y \end{bmatrix}$
	City Baltimore	State Zip Code MD 21279			Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance Candidate Name		Са	001 tegory/	460.00
	Office Sought: House Disburs	sement For: Primary General Other (specify)		Гуре	
s	UBTOTAL of Disbursements This Page (optional)		▶	546.55
	OTAL This Period (last page this line number only				

SCHEDULE B (FEC Form 3X)

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NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA	e and address of any political co)		Olicit Corti	ibulio	IIS IIOI	- Suciri	COMMI	illee	
Full Name (Last, First, Middle Initial) Connell Donatelli, Inc. Mailing Address PO Box 1877					of Dis	n ID: S			'2 0 0 7	Y
	State Zip Code						Disburse			
	VA 22313			Amoc	int or i	Lacii L	JISBUI'SC			
Purpose of Disbursement Website Expense Candidate Name	[003 Categ	ory/	L.	•			67	725.0	0
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	Тур	е							
Full Name (Last, First, Middle Initial) 3. IDMI						burser	D / `			Y
Mailing Address 490 White Pond Drive				0 8		2 4	4	2 () Ď 7	
Akron	State Zip Code OH 44320			Amou	int of I	Each [Disburse		this Pe	-
Purpose of Disbursement Database File Maintenance Candidate Name		00 ⁻ Categ	ory/		0			20	009.1	7
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	- 71								
Full Name (Last, First, Middle Initial) Michael E. Jaconi						n ID: S burser	SB21B ment	.9758	85	
Mailing Address 1615 33rd Street, NW				0 ^M 8	M /	^D 23	3 /	ž () ŏ 7	Y
•	State Zip Code DC 20007			Amou	ınt of I	Each [Disburse	ement	this Pe	eriod
Purpose of Disbursement Parking (See Attached Text)	[00-	1	L.				. 1	180.2	2
Candidate Name		Categ Typ								
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)			•			-		95	64.3	9
TOTAL This Period (last page this line number only)			•							

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE N		PAC	SE 11/24	1
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 🔲	23 24 28c	25 29	26 30b
Any Information copied from such Reports and Statem		any person fo	r the purpose	e of solicating co	ntributions	
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA	e and address of any political cor	nmittee to soli	cit contributio	ons from such co	ommittee	
Full Name (Last, First, Middle Initial) A. Mini U Storage			Date of Dis	on ID: SB21B.9		v
Mailing Address 500 S. Pickett Street			0 8	0 3	žoŏ7	
	State Zip Code VA 22304		Amount of	Each Disbursen		-
Purpose of Disbursement Storage Candidate Name	C	001 category/ Type			119.00	,
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼	1,700				
Full Name (Last, First, Middle Initial) National City Bank Mailing Address PO Box 5756				bon ID: SB21B.9 sbursement	7582 2 0 0 7	Y
City Akron Purpose of Disbursement Bank Fees Candidate Name	State Zip Code OH 44101	001 category/	Amount of	Each Disbursen	nent this Pe	-
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Туре				
Full Name (Last, First, Middle Initial) Paychex			Date of Dis	on ID: SB21B.9 sbursement		_
Mailing Address 7450 Tilghman St., Ste.	107		08 4	1 0 / Y	ž 0 ŏ 7 `	
City Allentown	State Zip Code PA 18106-9037		Amount of	Each Disbursen		-
Purpose of Disbursement Payroll Processing Fee Candidate Name	C	001 category/ Type			85.95)
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)		▶			226.61	1
TOTAL This Period (last page this line number only)						

90	CHEDULE B (FEC Form 3X)		1	
	•	Use seperate schedule(s	(check onl	NUMBER: PAGE 12 / 24
IT	EMIZED DISBURSEMENTS	for each category of the	X 21b	\bigcap 22 \bigcap 23 \bigcap 24 \bigcap 25 \bigcap 26
		Detailed Summary Page		28a 28b 28c 29 30b
Anv	/ Information copied from such Reports and Stat	ements may not be sold or use	ed by any person f	for the purpose of solicating contributions
	or commercial purposes, other than using the na			
abla	NAME OF COMMITTEE (In Full)			
$ \rangle$	STRAIGHT TALK AMERICA			
\mathbb{L}				
	Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.97580
Α.	Sprint PCS			Date of Disbursement
	Matter Address BO D 1700			$\begin{bmatrix} 0 & 8 & M & / & D & 2 & 4 & / & 2 & 0 & 0 & 7 \end{bmatrix}$
	Mailing Address PO Box 1769			24 2007
	City	State Zip Code		Amount of Each Disbursement this Period
	Newark	NJ 07101-1769	9	Authority of Each Biobardonicht and Forted
	Purpose of Disbursement			70.75
	Telephone - Cellular		001	
	Candidate Name		Category/	
			Туре	
	Office Sought: House Disbut	sement For:		
	Senate	Primary General		
	President	Other (specify)		
	State: District:			
В.	Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.97574
Ь.	Strategic Telecommunications			Date of Disbursement
	Mailing Address 7591 9th Street North			$ \begin{bmatrix} 0 & 8 & 0 & 0 & 0 \\ 0 & 8 & 0 & 0 & 0 \end{bmatrix} $
	7391 3til Street North			
	City	State Zip Code		Amount of Each Disbursement this Period
	Oakdale	MN 55128	_	
	Purpose of Disbursement			10000.00
	Telemarketing		003	
	Candidate Name		Category/	
	Office County District		Туре	
	Office Sought: House Disbut	rsement For: Primary General		
	President	Other (specify)		
	State: District:	Office (apociny) \		

1		
SUBTOTAL of Disbursements This Page (optional)	<u> </u>	10070.75
TOTAL This Period (last page this line number only)	•	20408.30

(Use separate schedule(s) for each

PAGE 13 / 24 FOR LINE NUMBER: (check only one)

Χ	9
	10

Excluding Loans		numbered line)	10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor o HEATHER WILSON FOR CONGRESS	r Creditor		ebt (Purpose): irfare and Lodg-
Mailing Address PO Box 14070			
City State Albuquerque NM	ZIP Code 87191		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.96368
454.80			
Amount Incurred This Period 0.00	Payment This Period		ng Balance at Close of This Period 454.80
			434.00
B. Full Name (Last, First, Middle Initial) of Debtor o Karen Floyd 2006 Campaign	r Creditor	Nature of D Travel-Air	ebt (Purpose): fare
Mailing Address 113 West Main Street			
City State Spartanburg SC	ZIP Code 29306		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.96364
791.23			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
0.00	0.00		791.23
C. Full Name (Last, First, Middle Initial) of Debtor o MIKE DEWINE FOR US SENATE	r Creditor	Nature of D Travel-Air	ebt (Purpose): fare
Mailing Address PO Box 340188			
City State Columbus OH	ZIP Code 43234		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD9.96363
9279.83			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		9279.83
1) SUBTOTALS This Period This Page (optional)		. •	10525.86
2) TOTALS This Period (last page this line number on	ly)	•	10525.86
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	>	

(Use separate schedule(s) for each numbered line)

PAGE 14 / 24 FOR LINE NUMBER: 9 X 10 (check only one)

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
			Nature of Debt (Purpose): Consultant-Legal	
Mailing Address One Thomas Circle, NW Ste	e. 1100			
City State Washington DC	ZIP Code 20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97158	
555.05				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00	0.00		555.05	
B. Full Name (Last, First, Middle Initial) of Debtor of Caplin & Drysdale	or Creditor	Nature of D Consulting	ebt (Purpose): g-Legal	
Mailing Address One Thomas Circle, NW Ste	e. 1100			
City State Washington DC	ZIP Code 20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97383	
1017.91				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00	0.00		1017.91	
C. Full Name (Last, First, Middle Initial) of Debtor of Caplin & Drysdale	or Creditor	Nature of D Consultan	ebt (Purpose): t-Legal	
Mailing Address One Thomas Circle, NW Ste	e. 1100			
City State Washington DC	ZIP Code 20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97376	
37.00				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00	0.00		37.00	
1) SUBTOTALS This Period This Page (optional)		•	1609.96	
2) TOTALS This Period (last page this line number or	ıly)	>		
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	>		
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	>		

(Use separate schedule(s) for each

PAGE 15 / 24 FOR LINE NUMBER: (check only one)

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		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Caplin & Drysdale			Nature of Debt (Purpose): Consultant-Legal	
Mailing Address One Thomas Circle, NW Si	te. 1100			
City State Washington DC	ZIP Code 20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97441	
630.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		630.00	
B. Full Name (Last, First, Middle Initial) of Debtor Connell Donatelli, Inc.	or Creditor		ebt (Purpose): t Purchase	
Mailing Address PO Box 1877				
City State Alexandria VA	ZIP Code 22313			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97377	
6725.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	6725.00		0.00	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Huckaby Davis Lisker			ebt (Purpose): ce Consultant	
Mailing Address 228 S. Washington St., Sui	te 115			
City State Alexandria VA	ZIP Code 22314			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97435	
1000.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		1000.00	
1) SUBTOTALS This Period This Page (optional)		•	1630.00	
2) TOTALS This Period (last page this line number of	only)	>		
3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	>		
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	- -		

(Use separate schedule(s)

PAGE 16 / 24 FOR LINE NUMBER:

Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA				
			Nature of Debt (Purpose): Compliance Consultant	
Mailing Address 228 S. Washington St., Suite	115			
City State Alexandria VA	ZIP Code 22314			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97424	
1000.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		1000.00	
B. Full Name (Last, First, Middle Initial) of Debtor or Huckaby Davis Lisker	Creditor		lebt (Purpose): ce Consultant	
Mailing Address 228 S. Washington St., Suite	115			
City State Alexandria VA	ZIP Code 22314			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97547	
1000.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		1000.00	
C. Full Name (Last, First, Middle Initial) of Debtor or Huckaby Davis Lisker	Creditor		ebt (Purpose): ce Consultant	
Mailing Address 228 S. Washington St., Suite	115			
City State Alexandria VA	ZIP Code 22314			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97587	
0.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
1000.00	0.00		1000.00	
1) SUBTOTALS This Period This Page (optional)		>	3000.00	
2) TOTALS This Period (last page this line number only	·)	>		
3) TOTALS OUTSTANDING LOANS from Schedule 0	C (last page only)	>		
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	>		

(Use separate schedule(s) for each

PAGE 17 / 24 FOR (check

LINE NUMBER:		
k only one)		9
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Excluding Loans numb		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA		·	
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		bt (Purpose): File Maintenance
Mailing Address 490 White Pond Drive			
City State Akron OH	ZIP Code 44320		
Outstanding Balance Beginning This Period 45981.37		Tran	saction ID: SD10.97426
Amount Incurred This Period	Payment This Period	Outstanding	g Balance at Close of This Period
0.00	2659.17		43322.20
B. Full Name (Last, First, Middle Initial) of Debt IDMI	or or Creditor		bt (Purpose): File Maintenance
Mailing Address 490 White Pond Drive			
City State Akron OH	ZIP Code 44320		
Outstanding Balance Beginning This Period		Tran	saction ID: SD10.97479
140.00			
Amount Incurred This Period	Payment This Period		g Balance at Close of This Period
0.00	0.00		140.00
C. Full Name (Last, First, Middle Initial) of Debt IDMI	or or Creditor		bt (Purpose): File Maintenance
Mailing Address 490 White Pond Drive			
City State Akron OH	ZIP Code 44320		
Outstanding Balance Beginning This Period 720.34		Tran	saction ID: SD10.97484
Amount Incurred This Period	Payment This Period	Outstanding	g Balance at Close of This Period
0.00	0.00		720.34
SUBTOTALS This Period This Page (optional)		•	44182.54
2) TOTALS This Period (last page this line number	r only)	>	
3) TOTALS OUTSTANDING LOANS from Schee	dule C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page only)	- -	

(Use separate schedule(s) for each numbered line)

PAGE 18 / 24 FOR LINE NUMBER: 9 X 10 (check only one)

NAME OF COMMITTEE (In Full)	
STRAIGHT TALK AMERICA	

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor IDMI	or Creditor		ebt (Purpose): File Maintenance
Mailing Address 490 White Pond Drive			
City State Akron OH	ZIP Code 44320		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97548
140.00 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		140.00
B. Full Name (Last, First, Middle Initial) of Debtor IDMI	or Creditor		ebt (Purpose): File Maintenance
Mailing Address 490 White Pond Drive			
City State Akron OH	ZIP Code 44320		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97588
0.00 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
6413.44	0.00		6413.44
C. Full Name (Last, First, Middle Initial) of Debtor Courtney Nahigian	or Creditor	Nature of D Salary	ebt (Purpose):
Mailing Address 331 Cameron Station Blvd.			
City State Alexandria VA	ZIP Code 22304		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97423
3201.90 Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		3201.90
1) SUBTOTALS This Period This Page (optional)		•	9755.34
2) TOTALS This Period (last page this line number of	nly)	>	
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	_ >	

(Use separate schedule(s) for each

PAGE 19 / 24 FOR LINE NUMBER: (check only one) 9

		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor or Courtney Nahigian	Creditor	Nature of D Salary	ebt (Purpose):
Mailing Address 331 Cameron Station Blvd.			
City State Alexandria VA	ZIP Code 22304		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97485
3201.90			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		3201.90
B. Full Name (Last, First, Middle Initial) of Debtor or Courtney Nahigian	Creditor	Nature of D Salary	ebt (Purpose):
Mailing Address 331 Cameron Station Blvd.			
City State Alexandria VA	ZIP Code 22304		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97546
3201.90			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		3201.90
C. Full Name (Last, First, Middle Initial) of Debtor or Courtney Nahigian	Creditor	Nature of D Salary	ebt (Purpose):
Mailing Address 331 Cameron Station Blvd.			
City State Alexandria VA	ZIP Code 22304		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.97586
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
3201.90	0.00		3201.90
1) SUBTOTALS This Period This Page (optional)		•	9605.70
2) TOTALS This Period (last page this line number onl	у)	>	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	_ >	

(Use separate schedule(s) for each

PAGE 20 / 24 FOR LINE NUMBER: (check only one)

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debtor or Paychex	Creditor		bt (Purpose): Contribution Pay-
Mailing Address 7450 Tilghman St., Ste. 107			
City State Allentown PA	ZIP Code 18106-9037		
Outstanding Balance Beginning This Period 1642.35		Tran	saction ID: SD10.97428
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
0.00	0.00		1642.35
B. Full Name (Last, First, Middle Initial) of Debtor or Paychex	Creditor	Nature of De Employer (roll Taxes	bt (Purpose): Contribution Pay-
Mailing Address 7450 Tilghman St., Ste. 107			
City State Allentown PA	ZIP Code 18106-9037		
Outstanding Balance Beginning This Period		Tran	saction ID: SD10.97481
1642.35	Decimand This Decimal	Outstandin	n Delegas et Oleas et This Devied
Amount Incurred This Period 0.00	Payment This Period 0.00		g Balance at Close of This Period 1642.35
C. Full Name (Last, First, Middle Initial) of Debtor or Paychex	Creditor		bbt (Purpose): Contribution Pay-
Mailing Address 7450 Tilghman St., Ste. 107			
City State Allentown PA	ZIP Code 18106-9037		
Outstanding Balance Beginning This Period 1642.35		Tran	saction ID: SD10.97549
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
0.00	0.00		1642.35
1) SUBTOTALS This Period This Page (optional)		•	4927.05
2) TOTALS This Period (last page this line number only	y)	_ >	
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	>	

(Use separate schedule(s) for each

PAGE 21 / 24 FOR LINE NUMBER: (check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debto Paychex	or or Creditor		Debt (Purpose): r Contribution Pay-
Mailing Address 7450 Tilghman St., Ste. 10	07		
City State Allentown PA	ZIP Code 18106-9037		
Outstanding Balance Beginning This Period 0.00		Tra	ansaction ID: SD10.97589
Amount Incurred This Period	Payment This Period	Outstandi	ing Balance at Close of This Period
1642.35	0.0	00	1642.35
B. Full Name (Last, First, Middle Initial) of Debto Richard Quinn & Associates	or or Creditor	Nature of E Consultar	Debt (Purpose): nt-Polling
Mailing Address 1600 Gervais Street			
City State Columbia SC	ZIP Code 29201		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97204
26725.00 Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
0.00	0.C		26725.00
C. Full Name (Last, First, Middle Initial) of Debto Southwest Publishing and Mailing Corp.	or or Creditor		Debt (Purpose): ail-Postage/Produ-
Mailing Address 2600 NW Topeka Blvd.			
City State Topeka KS	ZIP Code 66617		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.86868
36276.23 Amount Incurred This Period	Payment This Period	Outstand [;]	ing Balance at Close of This Period
0.00	0.0		36276.23
1) SUBTOTALS This Period This Page (optional).		>	64643.58
2) TOTALS This Period (last page this line number	only)	>	
3) TOTALS OUTSTANDING LOANS from Sched	ule C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page onl	y) >	

(Use separate schedule(s) for each

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			
A. Full Name (Last, First, Middle Initial) of Debto Southwest Publishing and Mailing Corp.	or or Creditor		Debt (Purpose): ail-Postage/Produ-
Mailing Address 2600 NW Topeka Blvd.			
City State Topeka KS	ZIP Code 66617		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.96351
16648.18			
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
0.00	0.0	00	16648.18
B. Full Name (Last, First, Middle Initial) of Debto Southwest Publishing and Mailing Corp.	or or Creditor		Debt (Purpose): ail-Postage/Produ-
Mailing Address 2600 NW Topeka Blvd.			
City State Topeka KS	ZIP Code 66617		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97482
9770.77			
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
0.00	0.0	00	9770.77
C. Full Name (Last, First, Middle Initial) of Debto Strategic Telecommunications	or or Creditor	Nature of I Telemark	Debt (Purpose): keting
Mailing Address 7591 9th Street North			
City State Oakdale MN	ZIP Code 55128		
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.96353
20822.60			
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
0.00	10000.0	00	10822.60
1) SUBTOTALS This Period This Page (optional).		•	37241.55
2) TOTALS This Period (last page this line number	only)	>	
3) TOTALS OUTSTANDING LOANS from Sched	lule C (last page only)	>	
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page on	ly) ►	

(Use separate schedule(s)

PAGE 23 / 24 FOR LINE NUMBER:

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DEBIS AND OBLIGATIONS		for each numbered line)	(check only one) 9 X 10		
Excluding Loans NAME OF COMMITTEE (In Full) STRAIGHT TALK AMERICA			X 10		
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of I	Debt (Purpose):		
Strategic Telecommunications			Telemarketing		
Mailing Address 7591 9th Street North					
City State Oakdale MN	ZIP Code 55128				
Outstanding Balance Beginning This Period		Tra	ansaction ID: SD10.97483		
2233.00					
Amount Incurred This Period	Payment This Period		ing Balance at Close of This Period		
0.00	0.00)	2233.00		
1) SUBTOTALS This Period This Page (optional)		. •	2233.00		
2) TOTALS This Period (last page this line number of		>	178828.72		
3) TOTALS OUTSTANDING LOANS from Schedul	le C (last page only)	.			
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only	<u> </u>			

Image# 27931219095

Form/Schedule: **F3XN**Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.22 and thus did not constitute in-kind contributions or independent expenditures. 3) The committee has reviewed all travel and subsistence expenditures, and reviewed the reporting requirements outlined at 11 CFR 104.9 and in the instructions for Schedule B. There is no further itemization required under any Commission regulation for these expenditures.

Form/Schedule: **SB21B** This check was originally issued to Michael E. Jaconi on July 12, 2006 (See FEC-241826, Tran ID# SB21B.58347, Transaction ID: **SB21B.9758** B21B.58402) and not timely cashed. The check was then voided on July 23, 2007 (See FEC-301859, Tran ID# SB21-397550) The bank subsequently cashed the check on August 23, 2007; thus we are disclosing it on this report.